3821 SOUTH CHICAGO AVENUE SOUTH MILWAUKEE 53172 Ownershi p: Corporati on Phone: (414) 762-7336 Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? Yes Number of Beds Set Up and Staffed (12/31/00): 91 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/00): 91 Average Daily Census: 85 Number of Residents on 12/31/00: 84

County: Milwaukee

WILLOWCREST CARE CENTER

***********	****	*********	*****	*******	******	*********	******
Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/00	%				
Home Health Care	No	Primary Diagnosis	Age Groups %		1	46. 4	
Supp. Home Care-Personal Care Supp. Home Care-Household Services	No No	   Developmental Disabilities		Under 65	1. 2	1	42. 9 10. 7
Day Services	No	· 0 J/		65 - 74 14.3		1	
Respite Care Adult Day Care		Mental Illness (Other)   Alcohol & Other Drug Abuse		75 - 84   85 - 94	39. 3 36. 9	1	100. 0 ******
Adult Day Health Care		Para-, Quadra-, Hemiplegic		95 & 0ver	8. 3	1	nt
Congregate Meals No   Cancer			3. 6			Nursing Staff per 100 R	esi dents
Home Delivered Meals Other Meals	No No	Fractures   Cardi ovascul ar	13. 1	   65 & 0ver	100.0	(12/31/00)	
Transportation		Cerebrovascul ar					9. 3
Referral Service	No	Diabetes	0.0	Sex	%	LPNs	10. 8
Other Services	Yes	Respiratory				Nursing Assistants	
Provide Day Programming for	No	Other Medical Conditions		Male	34. 5	1	38. 3
Mentally Ill Provide Day Programming for	No	 	100. 0	Female	65. 5		
Developmentally Disabled	No				100. 0		

## Method of Reimbursement

		Medi	care		Medi c	ai d											
	(Title 18)		(	(Title 19)			0ther			Private Pay			Manage	Percent			
			Per Die	em		Per Die	m		Per Die	m		Per Dien	ı		Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	2	4. 1	\$127. 68	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	2	2. 4%
Skilled Care	20	100. 0	\$347.43	43	87. 8	\$109.45	0	0. 0	\$0.00	7	100.0	\$194.86	8	100. 0	\$344.40	78	92. 9%
Intermediate				4	8. 2	\$91. 23	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	4	4.8%
Limited Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Personal Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Residential Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Traumatic Brain In	j. 0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Ventilator-Depende	nt 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Total	20	100. 0		<b>49</b> 1	100. 0		0	0. 0		7	100.0		8	100. 0		84	100.0%

WILLOWCREST CARE CENTER

**********	*****	*******	******	******	*********	*********	******
Admissions, Discharges, and		Percent Distribution	n of Residents'	Condi ti	ons, Servi ces	, and Activities as of $12/3$	31/00
Deaths During Reporting Period							
				%	Needi ng		Total
Percent Admissions from:		Activities of	%	Ass	sistance of	% Totally	Number of
Private Home/No Home Health	1.5	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent I	Resi dents
Private Home/With Home Health	3.8	Bathi ng	6. 0		58. 3	35. 7	84
Other Nursing Homes	2.7	Dressi ng	9. 5		54. 8	35. 7	84
Acute Care Hospitals	83. 5	Transferring	19. 0		31. 0	50. 0	84
Psych. HospMR/DD Facilities	0.0	Toilet Use	17. 9		41. 7	40. 5	84
Rehabilitation Hospitals	1. 1	Eati ng	69. 0		3. 6	27. 4	84
Other Locations	7. 3	***************	******	******	*********	*********	******
Total Number of Admissions	261	Continence		%	Special Trea	tments	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	13. 1	Recei vi ng	Respi ratory Care	8. 3
Private Home/No Home Health	<b>56</b> . 3	0cc/Freq. Incontine	nt of Bladder	<b>52. 4</b>	Recei vi ng	Tracheostomy Care	0. 0
Private Home/With Home Health	1.1	0cc/Freq. Incontine	nt of Bowel	46. 4	Recei vi ng	Sucti oni ng	0. 0
Other Nursing Homes	0.0				Recei vi ng	Ostomy Care	8. 3
Acute Care Hospitals	17. 1	Mobility			Recei vi ng	Tube Feeding	4.8
Psych. HospMR/DD Facilities	0.0	Physically Restrain	ed	7. 1	Recei vi ng	Mechanically Altered Diets	21. 4
Rehabilitation Hospitals	0.4						
Other Locations	10.6	Skin Care			Other Reside	nt Characteristics	
Deaths	14. 4	With Pressure Sores		14. 3	Have Advan	ce Directives	84. 5
Total Number of Discharges		With Rashes		0.0	Medi cati ons		
(Including Deaths)	263				Recei vi ng	Psychoactive Drugs	35. 7
**********	*****	********	******	******	*********	*********	******

		Ownershi p:		Bed	Size:	Li co	ensure:		
	This Proprietary		50-	- 99	Ski l	lled	All Facilities		
	Facility	acility Peer Group		Peer	Group	Peer Group			
	%	%	Ratio	%	Ratio	%	<b>Ratio</b>	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	93. 4	74.6	1. 25	86. 1	1.09	81. 9	1. 14	84. 5	1. 11
Current Residents from In-County	94. 0	84. 4	1. 11	90. 2	1.04	85. 6	1. 10	77. 5	1.21
Admissions from In-County, Still Residing	13. 8	20. 4	0. 68	22. 1	0. 62	23. 4	0. 59	21. 5	0.64
Admissions/Average Daily Census	307. 1	164. 5	1.87	168. 8	1. 82	138. 2	2. 22	124. 3	2. 47
Discharges/Average Daily Census	309. 4	165. 9	1.87	169. 2	1.83	139. 8	2. 21	126. 1	2. 45
Discharges To Private Residence/Average Daily Census	177. 6	62. 0	2.87	70. 9	2. 50	48. 1	3. 69	49. 9	3. 56
Residents Receiving Skilled Care	95. 2	89. 8	1.06	93. 2	1.02	89. 7	1.06	83. 3	1.14
Residents Aged 65 and Older	98. 8	87. 9	1. 12	93. 4	1.06	92. 1	1.07	87. 7	1. 13
Title 19 (Medicaid) Funded Residents	58. 3	71. 9	0. 81	51.5	1. 13	65. 5	0.89	69. 0	0.85
Private Pay Funded Residents	8. 3	15. 0	0. 55	36. 3	0. 23	24. 5	0.34	22.6	0.37
Developmentally Disabled Residents	0. 0	1. 3	0.00	0.4	0.00	0. 9	0.00	7. 6	0.00
Mentally Ill Residents	7. 1	31. 7	0. 23	33. 0	0. 22	31. 5	0. 23	33. 3	0. 21
General Medical Service Residents	44. 0	19. 7	2. 24	24. 2	1.82	21.6	2.04	18. 4	2. 39
Impaired ADL (Mean)	57. 1	50. 9	1. 12	48.8	1. 17	50. 5	1. 13	49. 4	1. 16
Psychological Problems	35. 7	<b>52.</b> 0	0. 69	47.7	0. 75	49. 2	0. 73	50. 1	0.71
Nursing Care Required (Mean)	7. 1	7. 5	0. 95	7. 3	0. 98	7. 0	1. 02	7. 2	1.00